
OBSTETRICAL EMERGENCIES

BLS INTERVENTIONS

1. Oxygen as indicated
2. Prepare for delivery
3. Massage fundus if placenta delivered
4. Excessive vaginal bleeding prior to delivery
 - a. Attempt to contain bleeding, do not place anything into vagina
 - b. Trendelenberg position
5. Prolapsed Cord
 - a. Hips elevated
 - b. Gently push presenting part of head away from cord
 - c. Consider knee/chest position for mother
6. Post Partum Hemorrhage
 - a. Massage fundus to control bleeding
 - b. Encourage immediate breast feeding
 - c. Trendelenburg position
7. Cord around infant's neck
 - a. Attempt to slip cord over head
 - b. If unable to slip cord over head, deliver the baby through the cord
 - c. If unable to deliver the baby through the cord, double clamp cord, then cut cord between clamps.
8. Breech presentation and head not delivered within 3-4 minutes
 - a. Hi-flow O2 on patient
 - b. Trendelenburg position
 - c. Code 3 to closest appropriate facility
9. Pregnancy Induced Hypertension and Eclampsia
 - a. Seizure precautions
 - b. Attempt to reduce stimuli
 - c. Limit fluid intake
 - d. Monitor and document B/P
 - e. Consider side lying position

ALS INTERVENTIONS

1. Obtain IV access, and maintain IV rate as appropriate
2. Excessive vaginal bleeding or post-partum hemorrhage
 - a. Give fluid challenge of 500ml, may repeat once to sustain a B/P >90mmHg
 - b. Maintain IV rate at 150cc/hr
 - c. Establish 2nd large bore IV enroute

3. Pregnancy Induced Hypertension / Eclampsia
 - a. IV TKO, limit fluid intake.
 - b. Obtain O2 saturation on room air, if possible.
 - c. Place in left lateral position, and obtain BP after 5 minutes.
 - d. Obtain rhythm strip with copy to receiving hospital.
 - e. For tonic/clonic activity infuse 4 grams Magnesium Sulfate diluted with 20cc NS, IV/IO over 3-4 minutes.
 - f. For continued seizure activity after administration of Magnesium Sulfate, give:
Midazolam 2.5-5mg IV/IO for a maximum dose of 5mg IV/IO, or
Midazolam 5-10mg IM for a maximum dose of 10mg IM

BASE HOSPITAL ORDER

- *1. Dopamine infusion a 5-20mcg/kg/min if hypotension persists despite fluid administration.**
- *2. Establish infusion of 2grams Magnesium Sulfate in 100ml of NS at 0.5ml/minute IV/IO.**
- *3. May repeat Midazolam dose in 10 minutes.**

**May be done during radio communication failure*